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PTO/SB/22 (12-04)
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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) 08214/1200332-US2	
FY 2005 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)		00214/	1200332-032
Application Number 09/833,846		Filed	April 12, 2001
For METHOD AND SYSTEM FOR EXTRACTION AND ORGANIZING SELECTED DATA FROM SOURCES ON A NETWORK			
Art Unit 2162		Examiner	C. Y. T. Truong
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.			
The requested extension and fee are as follows (chec	k time period desi	red and enter the a	ppropriate fee below):
	<u>Fee</u>	Small Entity Fe	<u>e</u>
X One month (37 CFR 1.17(a)(1))	\$120	\$60	\$ 120.00
Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$
Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$
Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$
Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$
Applicant claims small entity status. See 37 CFR 1.27.      A check including the amount of the fee is enclosed.			
Payment by credit card. Form PTO-2038 is attached.			
The Director has already been authorized to charge fees in this application to a Deposit Account.			
X The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to			
Deposit Account Number 04-0100	I have enclo	sed a duplicate co	py of this sheet.
I am the applicant/inventor.  assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).			
attorney or agent of record. Re	egistration Number	41,622	<del> </del>
attorney or agent under 37 CFF Registration number if acting und			·
12 5. VILL		Ma	y 6, 2005
Signature		Date	
Bruce E. Black		(206) 262-8900	
Typed or printed name Telephone Number			
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.			
Total of 1 forms are submit	tted.		

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